

OMB APPROVAL

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

SEC USE ONLY
Prefix Serial

DATE RECEIVED

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

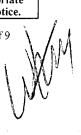
04011023		TION 4(6), AND/OR TED OFFERING E		649	94
Name of Offering (check if this is an a Andrea Electronics Corporation Series D		<i>U</i> /	<i>\(\tau \)</i>		<i>i</i>
Filing Under (Check box(es) that apply):	□ Rule 504	□ Rule 505	☑ Rule 506	☐ Section 4(6)	□ ULOE
71	Amendment	A SA			
		DENTIFICATION D	ATA		r i dinates di
1. Enter the information requested about the					
Name of Issuer (☐ check if this is an a				ndrea Electronics Co	
Address of Executive Offices (Number 45 Melville Park Road, Melville, New Yo	and Street, City State, ork 11747	Zip Code)	Telephone Nu (631) 719-18	mber (Including Area 100	Code)
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, C. Same	ity State, Zip Code)	Telephone Nu	mber (Including Area Same	Code)
Brief Description of Business					BKOCF23E
Radio and TV Broadcasting &	Communications Equi	ipment			/
Type of Business Organization	•	*			MAR 09 ZUUT
□ corporation	1	ership, already formed	□ otl	her (please specify)	THOMSON
□ business trust	☐ limited partn	ership, to be formed			FINANCIAL
Actual or Estimated Date of Incorporation Jurisdiction of Incorporation or Organization	on: (Enter two-letter U.)	Month Year November 1934 S. Postal Service abbre FN for other foreign ju			☐ Estimated
GENERAL INSTRUCTIONS					
Federal: Who Must File: All issuers making an offering of securi	ties in reliance on an exemptio	n under Regulation D or Secti	ion 4(6), 17 CFR 230.	501 et. seq. or 15 U.S.C. 77	'd(6).
When To File: A notice must be filed no later than 15 of the earlier of the date it is received by the SEC at the adecertified mail to that address.					
Where to file: U.S. Securities and Exchange Commission	on, 450 Fifth Street, N.W., Wa	shington, D.C. 20549.			
Copies Required: Five (5) copies of this notice must be copy or bear typed or printed signatures.	filed with the SEC, one of whi	ich must be manually signed.	Any copies not manu	ally signed must be photoco	pies of the manually signed
Information Required: A new filing must contain all info					he information requested in
Filing Fee: There is no federal filing fee.					
State: This notice shall be used to indicate reliance on the Unif- Issuers relying on ULOE must file a separate notice with precondition to the claim for the exemption, a fee in the p to the notice constitutes a part of this notice and must be	the Securities Administrator in proper amount shall accompany	n each state where sales are to	be, or have been ma	de. If a state requires the pa	yment of a fee as a

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-99) 1 of 9



		IFICATION DATA						
 Enter the information requested fo Each promoter of the issuer 	r the following: , if the issuer has been organized wit	hin the past five years;						
 Each beneficial owner having of the issuer; 	Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;							
Each executive officer and officer an	director of corporate issuers and of co	orporate general and managing	partners of partner	ship issuers; and				
Each general and managing	partner of partnership issuers.							
Check Box(es) that Apply: Prom	noter	☑ Executive Officer	□ Director	☐ General and/or Managing Partner				
Donofrio, Paul E. Full Name (Last name first, if individ	ual)							
45 Melville Park Road, Melville, Ne Business or Residence Address (Nur	w York 11747 nber and Street, City, State, Zip Cod	e)						
Check Box(es) that Apply: Pron	noter	☑ Executive Officer	□ Director	☐ General and/or Managing Partner				
Full Name (Last name first, if individ	ual)							
45 Melville Park Road, Melville, Ne Business or Residence Address (Nur	w York 11747 nber and Street, City, State, Zip Cod	e)						
Check Box(es) that Apply:	noter	☑ Executive Officer	☑ Director	☐ General and/or Managing Partner				
Andrea, Douglas J. Full Name (Last name first, if individ	ual)		······································					
45 Melville Park Road, Melville, Ne Business or Residence Address (Nur	w York 11747 nber and Street, City, State, Zip Cod	e)						
Check Box(es) that Apply:	oter	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner				
<u>Croteau, John R.</u> Full Name (Last name first, if individ	ual)							
45 Melville Park Road, Melville, Ne Business or Residence Address (Nur	w York 11747 nber and Street, City, State, Zip Cod	e)						
Check Box(es) that Apply: Prom	noter	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner				
Jones, Gary A. Full Name (Last name first, if individ	ual)							
15 Melville Park Road, Melville, Ne Business or Residence Address (Nur	w York 11747 nber and Street, City, State, Zip Cod	е)						
Check Box(es) that Apply:	noter	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner				

Koondel, Scott M.
Full Name (Last name first, if individual)

45 Melville Park Road, Melville, New York 11747
Business or Residence Address (Number and Street, City, State, Zip Code)

Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Libin, Louis				
Full Name (Last name first, if individual)				
45 Melville Park Road, Melville, New York	11747			
Business or Residence Address (Number and)		
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Migliozzi, Joseph J.				
Full Name (Last name first, if individual)				
45 Melville Park Road, Melville, New York	11747			
Business or Residence Address (Number and		:)		
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Spaet, Jonathan D.				Tranaging raines
Full Name (Last name first, if individual)				
45 Melville Park Road, Melville, New York	11747			
Business or Residence Address (Number and		e)		· · · · · · · · · · · · · · · · · · ·

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	B. INFORMATION ABOUT OFFERING		
1.	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	s No ⊠
	Answer also in Appendix, Column 2, if filing under ULOE		
2.	What is the minimum investment that will be accepted from any individual?		t offered individuals
3.	Does the offering permit joint ownership of a single unit?	Yes	s No ⊠
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or s remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated abover or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.	ciated	person or
	ightsbridge Holdings, LLC I Name (Last name first, if individual)		
<u> 299</u>	99 NE 199th Street, Penthouse Two, Aventura, Florida 33180		
Bu	siness or Residence Address (Number and Street, City, State, Zip Code)		
Na	me of Associated Broker or Dealer		
Sta	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
	(Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MI [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR	[] [] []	□All States
Ful	l Name (Last name first, if individual)		
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)		
Nai	me of Associated Broker or Dealer	-	
Sta	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
	(Check "All States" or check individual States)	[] [] []	□All States
Ful	l Name (Last name first, if individual)		
Bus	siness or Residence Address (Number and Street, City, State, Zip Code)		
Nai	ne of Associated Broker or Dealer		
Sta	tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers		<u>-</u>
Jiu	(Check "All States" or check individual States)	ſ	⊐All States
	[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MC] [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR] O] .]	- / III States

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering,			
	check this box □ and indicate in the columns below the amounts of the sœurities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt Equity □ Common ⊠ Preferred	\$ <u>0</u> \$ <u>1,250,000</u>	5	5(5_
	Convertible Securities (including warrants) Partnership Interests Other (Specify)	\$(1) \$0 \$0	5	
	Total	\$1,250,000	S	1,250,000
	(1) The offering included warrants exercisable for 2,500,000 shares of commo	on stock.		
	Answer also in appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregated dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero"			
		Number Investors		Aggregate Dollar Amount of Purchase
	Accredited Investors	19 0	§ §	1,250,000 6 0
	Total (for filings under Rule 504 only)		9	S
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offering of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C- Question 1.			
		Type of Security		Dollar Amount Sold
	Type of offering Rule 505 Regulation A Rule 504	NA NA NA NA	\$ \$ \$	NA NA
	Total	NA	\$	NA
4.a	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify)			\$
	Total		⋉	\$ <u>296,893</u>

<u>C. OFFERING PRICE</u>	, NUMBER OF INVESTORS, EXPENSE	SAN	O USE C	<u>JE PROCEE</u>	<u>DS</u>	
b. Enter the difference between the aggregate o and total expenses furnished in response to Part C	C - Question 4.a. This difference is the "adjus	ted gro	ss			¢ 052 107
proceeds to issuer."			• •			\$ <u>953,107</u>
used for each of the purposes shown. If estimate and check the box to the left of th	d gross proceeds to the issuer used or propose the amount for any purpose is not known, fi e estimate. The total of the payments listed m set forth in response to Part C - Question 4.b	ırnish ust equ	an Ial			
		_	Di	yments to Officers, rectors, & Affiliates	_	Payments To Others
Salaries and fees			\$			\$
Purchase of real estate			\$	 		\$
Purchase, rental or leasing and installation of machine			\$			\$
Construction or leasing of plant buildings and faciliti			\$			\$
Acquisition of other businesses (including the value of offering that may be used in exchange for the assets of issuer pursuant to a merger)	or securities of another		¢			¢
• • •			<u> </u>			Ψ
Repayment of indebtedness			\$			\$
Working capital			\$	•	Ø	<u>\$ 953,107</u>
Other (specify):			\$		⊠	<u>\$ 953,107</u>
			\$			<u>\$</u>
Column Totals			\$	<u>.</u>	\boxtimes	\$ 953,107
Total Payments Listed (column totals added)					\boxtimes	\$ 953,107
	D. FEDERAL SIGNATURE					
The issuer has duly caused this notice to be signed by signature constitutes an undertaking by the issuer to finformation furnished by the issuer to any non-accred	urnish to the U.S. Securities and Exchange C	Commi	ssion, u			
Issuer (Print or Type)	Signature /			Date		
Andrea Electronics Corporation	Paul E. Doroff	w		March 4	, 2004	
Name of Signer (Print or Type)	Title of Signer (Print or Type)					
Paul E. Donofrio	President and Chief Executive Officer					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE S	SIGNATURE						
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently su of such rule?		Yes □	No ⊠				
	See Appendix, Colum	in 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.							
3.	The undersigned issuer hereby undertakes to furnish to the state administ	trators, upon written request, information furnished by	the issuer to o	fferee				
4.	The undersigned issuer represents that the issuer is familiar with the cond Exemption (ULOE) of the state in which this notice is filed and understa of establishing that these conditions have been satisfied.			_				
	e issuer has read this notification and knows the contents to be true and has horized persons.	s duly caused this notice to be signed on its behalf by the	ne undersigned	duly				
auth			Date	d duly				
auth Issu	horized persons.		,	d duly				

President and Chief Executive Officer

Instruction:

Paul E. Donofrio

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3	4					5	
	accredited S	sell to non- investors in tate 3-Item1)	Type of security and aggregate offering price offered in State (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AL		X			1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		X	
AK		X							Х	
AZ		Х							X	
AR		Х		······································					Х	
CA		Х							Х	
СО		X							Х	
СТ		Х							X	
DE		Х							X	
DC		X							X	
FL		X							Х	
GA		X							X	
HI		Х							X	
ID		X							X	
IL		X							X	
IN		X							X	
IA_		X							X	
KS		X							X	
KY		X							X	
LA		X							X	
ME		X							Х	
MD_		X							X	
MA		X							X	
MI		X							X	
MN		X							X	
MS		X							X	
МО		X							X	

APPENDIX

1	2 3					4			5
	accredited S	sell to non- investors in tate 3-Item 1)	Type of security and aggregate offering price offered in State (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT	100	X			72			1.00	X
NE		х							X
NV		Х							Х
NH		Х							Х
NJ		Х							Х
NM		X					_		X
NY	X		Series D Convertible Preferred Stock and Warrants	19	\$1,250,000	0	0		Х
NC		Х							X
ND		X							Х
ОН		Х					<u>-</u>		х
OK		Х							Х
OR		х							х
PA		Х					•		х
RI		Х							X
SC		X							Х
SD		Х		 					Х
TN		X							Х
TX		X							X
UT		Х							X
VT		X							X
VA		X							X
WA		X							X
WV		X							X
WI		X							X
WY		X							X
PR		Х							X

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